



CAPT Dean Bailey  
COMNAVAIRPAC

As I write this, it has been over one month since the attacks of September 11<sup>th</sup>. Although our lives and our day-to-day routine have gone through many changes isince that date, our core mission of maximizing medical readiness and caring for our sick and injured shipmates has not changed at all. Indeed, recent events have only reemphasized the critical importance of the role that we are expected to fill by providing quality aeromedical support to all Naval Air Force personnel.

Readiness is our business. Readiness includes your personal readiness and training; the readiness of your medical equipment and supplies; and the medical readiness of your squadron/ship's personnel. If you haven't taken a look around your squadron or ship and asked yourself, "Am I ready to deploy tomorrow?", I would highly recommend that you take stock of your situation and have a plan to get yourself ready. Several of our commands found themselves faced with that very situation over the past few weeks. If you find you need some help, ask for it.

Earlier this month we officially designated our AIRPAC Senior Regional Flight Surgeons (SRFS) in writing. These flight surgeons, chosen by virtue of their seniority, experience, knowledge, training and position, have been designated to assist and advise this office on all regional medical issues involving AIRPAC personnel. The current AIRPAC Senior Regional Flight Surgeons are:

<u>Region</u>	<u>SRFS</u>
Atsugi	LCDR Darin Dinelli
China Lake	CDR Eric Schindler
Guam	LT Tim O'Hara
Kaneohe Bay	LT David Roska
Lemoore	CAPT Jon Cayle
North Island	CAPT Peter Eaton
Point Mugu	LCDR Dave Beverly
Tinker	LCDR Avery Bevin
Whidbey Island	CAPT Jack Mills

Some recent incidents reviewed here at the Force Medical offices have brought up a problem with screening exams for flight deck personnel. In some cases, these exams were being performed by AVTs or other corpsmen and were NOT reviewed/signed by a flight surgeon prior to authorizing individuals to work on a flight deck. A recent joint AIRPAC/AIRLANT message (attached) should clarify the policy on flight deck screenings. The bottom line is that the flight deck screening form for flight deck workers should be considered the equivalent of the uphit for designated aircrew, and the form must be reviewed and signed by a flight surgeon. Flight deck screenings must be performed on an annual basis. It is recommended that you review the files of all flight deck workers to ensure that they have a valid flight deck screening form on file before your next at sea period.

The recent death of a civilian in Florida due to inhalational anthrax and the infection of numerous others victims has served to highlight the critical importance of being prepared to prevent and treat the effects of exposure to a CBR agent. We have significantly augmented our shipboard allowances of CBR medications in recent weeks to ensure that the full spectrum of treatment modalities is covered. It is probably more important that all medical personnel are trained and educated in how to deal with the CBR threat. We have attached some quick reference material on BW agents to this edition of *Bones*; the complete 4<sup>th</sup> edition of the USAMRIID Handbook on

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the *Medical Management of Biological Casualties* is available as a download at [www.usamriid.army.mil/education/bluebook.html](http://www.usamriid.army.mil/education/bluebook.html).

Although planning for an event 6 months in the future may not be high on your immediate list of priorities, I encourage you to start thinking about registering for next year's Combined Operational and Aeromedical Problems Course (COAP). NEHC and NAMI recently announced the official dates for the Forty-Second Navy Occupational Health and Preventive Medicine Workshop, which includes the Eighth Annual Independent Duty Corpsmen Conference and the Fourth Annual Combined Operational and Aeromedical Problems Course. This huge event will be held from March 14 - 22, 2002 at the Chesapeake Conference Center in Chesapeake, Virginia. The COAP actually runs just from March 18-22, and the agenda is in the process of being formalized right

now. A plethora of information about the conferences is available at <http://nehc-workshop.med.navy.mil/ws-docs/home.htm>. For physicians assigned to operational units, travel funding is available from NSHS if you apply early! For more information, check out the NSHS web site at <http://nshs.med.navy.mil/gme/CMEFAQS.HTM>.

The number of AIRPAC medical personnel participating in Operation *Enduring Freedom* is growing on a daily basis, and I suspect the list of units participating will have changed drastically between the time I could write them all down and the time that this issue reaches your hands. Let me just say to all of you out there at the "pointy end" that you have our full support and heartfelt thanks for everything you are doing to keep us safe at home. On behalf of COMNAVAIRPAC, you have our prayers for a safe and successful deployment.



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The co-editors, CAPT Jerry Scholl and CDR Lou Gilleran, solicit your comments, opinions and articles of general interest to the AIRLANT/PAC medical communities. Correspondence may be sent to:

**COMNAVAIRLANT Force Medical**  
1279 Franklin Street  
Norfolk, VA 23511-2494

Voice: (757) 444-7028/29 DSN 564-7028/29  
Fax: (757) 444-5331 DSN 564-5331

**COMNAVAIRPAC Force Medical**  
Box 357051, NAS North Island  
San Diego, CA 92135-7051

Voice: (619) 545-1148 DSN 735-1148  
Fax: (619) 545-1146 DSN 735-1146

**COMNAVAIRLANT:**

Force Medical Officer	CAPT Dave Hiland, MC, USN
Asst Force Medical Officer	CAPT Jerry Scholl, MC, USN
Force Medical Admin Officer	CDR Dave Mater, MSC, USN
Environmental Health Officer	LCDR Deborah Cady, MSC, USN
Force Hospital Corpsman	HMCS(SW/FMF) Sandra Gaines, USN

**COMNAVAIRPAC:**

Force Medical Officer	CAPT Dean Bailey, MC, USN
Deputy Force Medical Officer	CDR Lou Gilleran, MC, USNR
Force Hospital Corpsman	HMC(MSW) Frank Acosta, USN
Asst Force Hospital Corpsman	HMC (FMF) Cynthia Freeman, USN

<a href="mailto:hilandda@cna.navy.mil">hilandda@cna.navy.mil</a>
<a href="mailto:schollgs@cna.navy.mil">schollgs@cna.navy.mil</a>
<a href="mailto:materda@cna.navy.mil">materda@cna.navy.mil</a>
<a href="mailto:cadyda@cna.navy.mil">cadyda@cna.navy.mil</a>
<a href="mailto:gainessd@cna.navy.mil">gainessd@cna.navy.mil</a>

<a href="mailto:bailey.dean.a@cnap.navy.mil">bailey.dean.a@cnap.navy.mil</a>
<a href="mailto:lgilleran@cnap.navy.mil">lgilleran@cnap.navy.mil</a>
<a href="mailto:acosta.frank@cnap.navy.mil">acosta.frank@cnap.navy.mil</a>
<a href="mailto:freeman.cynthia@cnap.navy.mil">freeman.cynthia@cnap.navy.mil</a>



CAPT Dave Hiland, MC, USN  
COMNAVLANT

Priorities at the AIRLANT Force Medical office have not changed significantly since the attack on September the 11<sup>th</sup>. That event has served to sharpen our focus. We are working more intently to support the carrier medical departments and the flight surgeons who ensure crew medical readiness.

Interest in CBR medical readiness has heightened. Fortunately CAPT Scholl's working group has been engaged with this issue for some time. The contents of a CBR pack up block are defined and each carrier will be augmented to that level. For ease of management, these blocks will be separate from the AMMAL. Details of the storage and the maintenance of the blocks will be the responsibility of your Supply Officer and the AIRPAC/ AIRLANT Supply Department.

CBR casualty training is essential. Senior Medical Officers must be certain that providers have had CBR training. Contact your TYCOM office or the nearest NEPMU for dates of available courses. The 2001 Operational Medicine CD contains CBR casualty treatment guidance. Additionally the 2001 CBR manual can be found at <http://www.nbc-med.org/SiteContent/HomePage/WhatsNew/MedManual/Feb01/handbook.htm>. Documentation of CBR training will be part of the scoring for future Medical Readiness Inspections.

You are all aware of the halt in routine immunizations. This halt does not apply to personnel in deployable or deploying units. Almost all aviation units should be maintaining their medical readiness. AIRLANT Flight Surgeons should contact their Senior Regional Flight Surgeon if any aviators encounter access problems. Vaccines are in short supply and if the need arises, Flight Surgeons can help the clinics by assigning priorities.

Beginning this month we started sending the Airwing Medical Readiness reports to the Senior Regional Flight Surgeons. The Senior Regional Flight Surgeons will be sharing this information with the squadron Flight Surgeons, Airwing Commanders, and Commodores. In some cases there is room for improvement and we will work with individual Flight Surgeons to overcome whatever obstacles there may be.



Medication errors have been identified as a problem in some of the monthly Quality Assurance monitoring reports. We can improve on this by utilizing the mishap prevention and safety training that Flight Surgeons and Senior Medical Officers have.

An AIRPAC/AIRLANT Force Medical message will be going to all Senior Medical Officers in order to direct a focused review of their Quality Assurance/ Risk Management programs. All carrier medical departments will conduct a review of medication errors and develop a plan of action for interventions that will prevent future medication errors. This is an opportunity to share lessons learned and to minimize risk for patients.

Finally, our thoughts and prayers are with our shipmates who are deployed.



## Deputy Force Medical Officer

CDR Lou Gilleran, MC, USNR  
COMNAVAIRPAC

I offer an obviously more somber greeting from San Diego. I hope current events have not caused too much distress for our readership and have served to strengthen your resolve and focused your attentions on issues such as CBR, Mass Casualty, Medical Readiness, and Pre-deployment issues. These are things that readily fall by the wayside in peace time, but as you now know are best managed continuously. Please let us know if you have any questions or concerns for which we may answer or refer you to the appropriate source.

Due to OPSEC we have deleted the Ship's status section from *Bones* until further notice, but have not forgotten our people and the hard work and sacrifice involved in being ship's company. Since the August edition of *Bones* I wish to say farewell and welcome the following personnel:

### Farewell:

LCDR Carol Sawmiller Ship's Surgeon VINSON  
LCDR Allison Coste Ship's Surgeon LINCOLN  
LCDR Joelle Coletta Ship's Surgeon STENNIS  
LT Dave Newman Physical Therapist STENNIS

### Welcome:

LCDR Erin Moore Ship's Surgeon CONNIE  
LCDR Todd Peterson Ship's Surgeon STENNIS  
LT Christopher Downing Ship's Surgeon LINCOLN  
LT Carlos Ramirez Ship's Surgeon VINSON  
LT Chris Front Clinical Psychologist STENNIS  
LT Terrance Stone Physician Assistant REAGAN  
LT Karen Kilman Physical Therapist STENNIS

### **Organizational Risk Management**

CDR Andy Bellenkes has submitted an article highlighting the new and less burdensome distant learning program to achieve 100% training of FSs, Physiologists and Psychologists as part of the larger mission of improving readiness and mission completion. This will be part of a bigger push in both military and civilian medicine to make safety a routine part of

medical care in line with the accomplishments of aviation safety programs. So do not delay, get trained today!

### **Flight Surgeon/Aviation Medical Technician Duties, Responsibilities and Utilization**

The new and improved FS/AVT Duties, Responsibilities and Utilization Instruction (CNAPINST 6000.3B/CNALINST 6000) has hit the streets and as it important to your day to day function has been reprinted in this edition of *Bones* (due to size the enclosures have been omitted). Two big changes are noted: 1. AVTs are recommended to work 40% of their time on squadron issues. This increase from 20% is primarily to improve the status of medical readiness and should be so utilized. 2. A new position is identified, Senior Regional Flight Surgeon (SRFS). The SRFS is an extension of Force Medical and is meant to improve relationships with MTFs, follow-up on taskers, provide quality assurance of aeromedical waivers, FNAEBs, HFB/HFCs, Mishap Boards and Medical Readiness Programs. The Force Medical Officers will be designate SRFSs for NASSs shortly based on leadership, experience and seniority.

### **Blood Borne Pathogens/Needlesticks**

HMC Cynthia Freeman, our new and hard working addition to the CNAP Force Medical staff has written an article for this edition summarizing the requirements and references for Management of Occupational Exposures to Bloodborne Pathogens. The article is well worth reading and let me highlight from personal and administrative experience that education will be one of your best tools. Also attached is the recent message from BUMED highlighting the congressional mandate to have such programs.

### **Operational Aeromedical Problems Course/NEHC/HP/IDC/Occ Hlth/Env Hlth Meeting**

In the messages of interest section you will see the announcement of this annual meeting that is a superb educational and networking opportunity. I urge all of you to attend if at all possible. The OAP will be held 18-21 Mar 02 in Virginia Beach, VA. Also attached is the message soliciting nominations for NEHC's Radiation Health and Preventive Medicine Technician of the Year awards. So recognize your people for their excellence!





### Go-bys

LT Doug Stephens, MAO VINSON has graciously forwarded some checklists that have thus far served them well during deployment. These include Descendent Affairs, Aero and Land Medevac. Please contact myself or LT Stephens if you would like a copy (I will send to all MAOs shortly). This is a good reminder that we are all busy and reinventing the wheel is not necessary. Therefore I implore all of us to not be shy and freely share your instructions and SOPs.

### Thrift Savings Plan

Coming soon to a neighborhood near you... The Thrift Savings Plan (TSP) open season will be upon shortly. What this means is that for the calendar year 2002 you need to set up your planned investments to take advantage of this new and useful retirement tool. Attached in the message of interest section is Q+A on TSP from CNO's office.

### Flu Vaccine

Yes this is a fixation of mine. I am here to remind you that there is an impending delay of production and delivery of the flu vaccine. This should not hamper your efforts to ensure 100% of personnel are vaccinated as per Navy policy. Attached is the DoD Health Affairs memo on "Preparation for Influenza Vaccine Shortage".

### Flight Deck Physicals

In the message of interest section you will note the recent message clarifying the requirement for Flt Deck Physicals and the fact that a FS must review and sign with the same focus as they would an upchit. The issue here is safety and the crucial role of screening personnel. A recurring problem is Flt Deck personnel returned to duty on medications or with conditions who should not be there. A key tool to prevent this is to know your people and to educate the non-FS providers.

### Air Marshall Physical Examinations

CDR Vernon Morgan, NAVAIRRESFOR Surgeon passed to me clarification he recently received from Melachor Antuano, MD, Director of Civil Aerospace Medical Institute, Federal Aviation Administration regarding the performance of aeromedical physical examinations for Air Marshalls. The Air Marshall physical examinations may only be done at FAA regional offices. To contact the regional office access the following website: <http://www.cami.jccbi.gov>

### Frequently Asked Questions

Subject: DEA # question

*Q: Do either of you know if I have an AIRPAC - assigned individual DEA number? Thanks.*

Subject: RE: DEA Number

DEA # is required for all (mil+civ) DoD physicians. Once obtained by cognizant Privileging Authority in conjunction with the physician it stays with the physician until time for renewal. Original is placed in Individual Credentialing file, maintained by cognizant Privileging Authority. This is a no-fee DEA for prescribing for eligible beneficiaries. If you already have one that can suffice, but if you decide to let it lapse upon expiration you must obtain a no-fee DoD sponsored one. If you plan to moonlight you will need a fee one and should check with the state in which you plan to moonlight to determine if there are other state requirements.



who said, "hey I got it under control", but since this is a TYCOM mandated program, it needs supervision by FSs and squadron Admin with enforcement of squadron members complying by the CO/XO/CMC/Dept Hds. It may have been looked at by squadron as, "a medical issue", but if you look at the instruction it is signed by the Chief of Staff and medical cannot do it without the full support and enforcement of the command!

The issue, and quite timely I may add, is that this is Medical Readiness, a

component of Force Health Protection that directly impacts the Operational Readiness of commands. So the FS needs to keep it in targeting range of command and clinic. As the program is still new, we are being quite flexible, but ultimately delinquent and incomplete reports will have to be addressed by official message traffic from AIRPAC to COs. This program is presently being looked at by the CINCs and BUMED (we are such trend setters) and a similar requirement may be made for all Navy commands in the not-too-distant future. Okay, soap box down.....

2. Subject: Squadron Medical Readiness

Question from CNAP: LCDR X, Where are your squadron medical readiness monthly reports for Jun-Aug 01?

*Re: Squadron Medical Readiness*

*I am unsure what to do at this point. Squadron Admin does not have the numbers and doesn't know about the readiness numbers. The only corpsman that knows where or about the numbers is not available. The AVT promised everything was up to speed before going on leave. So we will try to find the reports and send them. Thanks for your patience. LCDR X*

Subject: Re: Squadron Medical Readiness

Worst case scenario: You do not have June, July, and Aug reports. If they are available great, if not we can live without them. Each month's report is due by the 10th of the subsequent month, so Sept metrics are due by 10 Oct 01. Make sure they have that message going and it is reported IAW CNAPINST 6000.7. What we do need forthwith, as a minimum, is the denominator data, by gender and total in squadron (#male, #female, #total). It sounds like you guys may have a good AVT





## Assistant Force Medical Officer

CAPT Jerry Scholl, MC, USN  
COMNAVAIRLANT

A lot of things have happened since the last issue of *Bones* was published. The attacks on September 11th have not only heightened awareness of the potential for terrorist activity on our own soil, but have put many of our forces on alert or on the tip of the spear in the fight against terrorism. Emotions are high and the display of patriotism has been immense. The American people stand behind our efforts to keep America safe. In thinking about this issue of *Bones*, I tried to come up with something appropriate for the current time. Two things came to mind. First, I was wondering how many of you have actually read the document which you swore to support and defend and thought I would provide you with a copy. Second, I wanted to pass along a letter forwarded to me from GEORGE WASHINGTON that was written by a Naval Reserve Corpsman who works as a paramedic in New York City and was scheduled to be aboard GW for a recent underway period. I hope the items below will get you thinking about what we do for a living.



## My Ship

“CDR Petersen:

It helps to know that other people are keeping us in their thoughts. I would like you to let the crew of the USS G.W. know something: The other night I left the World Trade Center site after 19 hours of searching. I went to my cousins house to visit due to the fact that my cousin Lee, a retired FDNY firefighter lost his son Jonathan who responded to the crash on FDNY Engine Co. 288. While I was there a news cast came on the TV about the US Military presence in the waters around New York. The news had made mention about the USS G.W. being off New York providing CAP missions over the New York area. One of my relatives yells out to me “Hey Ed, there’s your ship!” I had told my family I would be aboard so I guess they assume that everyone in the Navy has a ship they belong to. I left my cousins house to go home and thought about the days events while I was driving and the thought about my relative saying that “My ship” was off New York.

When I got home I kept thinking about what she said about “My ship”, and thought how ironic it was that the ship I was to report aboard for AT was now protecting myself and everyone else for that matter. I can’t begin to explain the emotions that are happening with all of us here. We all know someone who did not make it out alive from those buildings. I lost 2

members of my family and no less than 10 close friends. So I thought about what my cousin said about “My ship” being off New York a little more and said to myself, she’s God damn right that’s MY SHIP and she’s watching over all of us. Please let the Officers and Crew now that we sleep well at night knowing that she’s out there. I hope to see you all soon to thank you all for keeping us from harms way. Thank you. “

HM2(FMF) Edward J.  
Keenan USNR  
LPO, 2nd Battalion, 25th  
Marines



## Constitution of the United States

We the people of the United States, in order to form a more perfect union, establish justice, insure domestic tranquility, provide for the common defense, promote the general welfare, and secure the blessings of liberty to ourselves and our posterity, do ordain and establish this Constitution for the United States of America.

### **Article I**

**Section 1.** All legislative powers herein granted shall be vested in a Congress of the United States, which shall consist of a Senate and House of Representatives.

**Section 2.** The House of Representatives shall be composed of members chosen every second year by the people of the several states, and the electors in each state shall have the qualifications requisite for electors of the most numerous branch of the state legislature. No person shall be a Representative who shall not have attained to the age of twenty five years, and been seven years a citizen of the United States, and who shall not, when elected, be an inhabitant of that state in which he shall be chosen. Representatives and direct taxes shall be apportioned among the several states which may be included within this union, according to their respective numbers, which shall be determined by adding to the whole number of free persons, including those bound to service for a term of years, and excluding Indians not taxed, three fifths of all other Persons. The actual Enumeration shall be made within three years after the first meeting of the Congress of the united States, and within every subsequent term of ten years, in such manner as they shall by law direct. The number of Representatives shall not exceed one for every thirty thousand, but each state shall have at least one Representative; and until such enumeration shall be made, the state of New Hampshire shall be entitled to chuse three, Massachusetts eight, Rhode Island and Providence Plantations one, Connecticut five, New York six, New Jersey four, Pennsylvania eight, Delaware one, Maryland six, Virginia ten, North Carolina five, South Carolina five, and Georgia three. When vacancies happen in the Representation from any state, the executive authority thereof shall issue writs of election to fill such vacancies. The House of Representatives shall choose their speaker and other officers; and shall have the sole power of impeachment.

**Section 3.** The Senate of the United States shall be composed of two Senators from each state, chosen by the legislature thereof, for six years; and each Senator shall have one vote. Immediately after they shall be assembled in consequence of the first election, they shall be divided as equally as may be into three classes. The seats of the Senators of the first class shall be vacated at the expiration of the second year, of the second class at the expiration of the fourth year, and the third class at the expiration of the sixth year, so that one third may be chosen every second year; and if vacancies happen by resignation, or otherwise, during the recess of the legislature of any state, the executive thereof may make temporary appointments until the next meeting of the legislature, which shall then fill such vacancies. No person shall be a Senator who shall not have attained to the age of thirty years, and been nine years a citizen of the United States and who shall not, when elected, be an inhabitant of that state for which he shall be chosen. The Vice President of the United States shall be President of the Senate, but shall have no vote, unless they be equally divided. The Senate shall choose their other officers, and also a President pro tempore, in the absence of the Vice President, or when he shall exercise the office of President of the United States. The Senate shall have the sole power to try all impeachments. When sitting for that purpose, they shall be on oath or affirmation. When the President of the United States is tried, the Chief Justice shall preside: And no person shall be convicted without the concurrence of two thirds of the members present. Judgment in cases of impeachment shall not extend further than to removal from office, and disqualification to hold and enjoy any office of honor, trust or profit under the United States: but the party convicted shall nevertheless be liable and subject to indictment, trial, judgment and punishment, according to law.

**Section 4.** The times, places and manner of holding elections for Senators and Representatives, shall be prescribed in each state by the legislature thereof; but the Congress may at any time by law make or alter such regulations, except as to the places of choosing Senators. The Congress shall assemble at least once in every year, and such meeting shall be on the first Monday in December, unless they shall by law appoint a different day.

**Section 5.** Each House shall be the judge of the elections, returns and qualifications of its own members, and a majority of each shall constitute a quorum to do business; but a smaller number may adjourn from day to day, and may be authorized to compel the attendance of absent members, in such manner, and under such penalties as each House may provide. Each House may determine the rules of its proceedings, punish its members for disorderly behavior, and, with the concurrence of two thirds, expel a member. Each House shall keep a journal of its proceedings, and from time to time publish the same, excepting such parts as may in their judgment require secrecy; and the yeas and nays of the members of





either House on any question shall, at the desire of one fifth of those present, be entered on the journal. Neither House, during the session of Congress, shall, without the consent of the other, adjourn for more than three days, nor to any other place than that in which the two Houses shall be sitting.

**Section 6.** The Senators and Representatives shall receive a compensation for their services, to be ascertained by law, and paid out of the treasury of the United States. They shall in all cases, except treason, felony and breach of the peace, be privileged from arrest during their attendance at the session of their respective Houses, and in going to and returning from the same; and for any speech or debate in either House, they shall not be questioned in any other place. No Senator or Representative shall, during the time for which he was elected, be appointed to any civil office under the authority of the United States, which shall have been created, or the emoluments whereof shall have been increased during such time: and no person holding any office under the United States, shall be a member of either House during his continuance in office.

**Section 7.** All bills for raising revenue shall originate in the House of Representatives; but the Senate may propose or concur with amendments as on other Bills. Every bill which shall have passed the House of Representatives and the Senate, shall, before it become a law, be presented to the President of the United States; if he approve he shall sign it, but if not he shall return it, with his objections to that House in which it shall have originated, who shall enter the objections at large on their journal, and proceed to reconsider it. If after such reconsideration two thirds of that House shall agree to pass the bill, it shall be sent, together with the objections, to the other House, by which it shall likewise be reconsidered, and if approved by two thirds of that House, it shall become a law. But in all such cases the votes of both Houses shall be determined by yeas and nays, and the names of the persons voting for and against the bill shall be entered on the journal of each House respectively. If any bill shall not be returned by the President within ten days (Sundays excepted) after it shall have been presented to him, the same shall be a law, in like manner as if he had signed it, unless the Congress by their adjournment prevent its return, in which case it shall not be a law. Every order, resolution, or vote to which the concurrence of the Senate and House of Representatives may be necessary (except on a question of adjournment) shall be presented to the President of the United States; and before the same shall take effect, shall be approved by him, or being disapproved by him, shall be repassed by two thirds of the Senate and House of Representatives, according to the rules and limitations prescribed in the case of a bill.

**Section 8.** The Congress shall have power to lay and collect taxes, duties, imposts and excises, to pay the debts and provide for the common defense and general welfare of the United States; but all duties, imposts and excises shall be uniform throughout the United States; To borrow money on the credit of the United States; To regulate commerce with foreign nations, and among the several states, and with the Indian tribes; To establish a uniform rule of naturalization, and uniform laws on the subject of bankruptcies throughout the United States; To coin money, regulate the value thereof, and of foreign coin, and fix the standard of weights and measures; To provide for the punishment of counterfeiting the securities and current coin of the United States; To establish post offices and post roads; To promote the progress of science and useful arts, by securing for limited times to authors and inventors the exclusive right to their respective writings and discoveries; To constitute tribunals inferior to the Supreme Court; To define and punish piracies and felonies committed on the high seas, and offenses against the law of nations; To declare war, grant letters of marque and reprisal, and make rules concerning captures on land and water; To raise and support armies, but no appropriation of money to that use shall be for a longer term than two years; To provide and maintain a navy; To make rules for the government and regulation of the land and naval forces; To provide for calling forth the militia to execute the laws of the union, suppress insurrections and repel invasions; To provide for organizing, arming, and disciplining, the militia, and for governing such part of them as may be employed in the service of the United States, reserving to the states respectively, the appointment of the officers, and the authority of training the militia according to the discipline prescribed by Congress; To exercise exclusive legislation in all cases whatsoever, over such District (not exceeding ten miles square) as may, by cession of particular states, and the acceptance of Congress, become the seat of the government of the United States, and to exercise like authority over all places purchased by the consent of the legislature of the state in which the same shall be, for the erection of forts, magazines, arsenals, dockyards, and other needful buildings;—And To make all laws which shall be necessary and proper for carrying into execution the foregoing powers, and all other powers vested by this Constitution in the government of the United States, or in any department or officer thereof.

**Section 9.** The migration or importation of such persons as any of the states now existing shall think proper to admit, shall not be prohibited by the Congress prior to the year one thousand eight hundred and eight, but a tax or duty may be imposed on such importation, not exceeding ten dollars for each person. The privilege of the writ of habeas corpus shall not be suspended, unless when in cases of rebellion or invasion the public safety may require it. No bill of attainder or ex post facto Law shall be passed. No capitation, or other direct, tax shall be laid, unless in proportion to the census or



enumeration herein before directed to be taken. No tax or duty shall be laid on articles exported from any state. No preference shall be given by any regulation of commerce or revenue to the ports of one state over those of another: nor shall vessels bound to, or from, one state, be obliged to enter, clear or pay duties in another. No money shall be drawn from the treasury, but in consequence of appropriations made by law; and a regular statement and account of receipts and expenditures of all public money shall be published from time to time. No title of nobility shall be granted by the United States: and no person holding any office of profit or trust under them, shall, without the consent of the Congress, accept of any present, emolument, office, or title, of any kind whatever, from any king, prince, or foreign state.

**Section 10.** No state shall enter into any treaty, alliance, or confederation; grant letters of marque and reprisal; coin money; emit bills of credit; make anything but gold and silver coin a tender in payment of debts; pass any bill of attainder, ex post facto law, or law impairing the obligation of contracts, or grant any title of nobility. No state shall, without the consent of the Congress, lay any imposts or duties on imports or exports, except what may be absolutely necessary for executing its inspection laws: and the net produce of all duties and imposts, laid by any state on imports or exports, shall be for the use of the treasury of the United States; and all such laws shall be subject to the revision and control of the Congress. No state shall, without the consent of Congress, lay any duty of tonnage, keep troops, or ships of war in time of peace, enter into any agreement or compact with another state, or with a foreign power, or engage in war, unless actually invaded, or in such imminent danger as will not admit of delay.

## Article II

**Section 1.** The executive power shall be vested in a President of the United States of America. He shall hold his office during the term of four years, and, together with the Vice President, chosen for the same term, be elected, as follows: Each state shall appoint, in such manner as the Legislature thereof may direct, a number of electors, equal to the whole number of Senators and Representatives to which the State may be entitled in the Congress: but no Senator or Representative, or person holding an office of trust or profit under the United States, shall be appointed an elector. The electors shall meet in their respective states, and vote by ballot for two persons, of whom one at least shall not be an inhabitant of the same state with themselves. And they shall make a list of all the persons voted for, and of the number of votes for each; which list they shall sign and certify, and transmit sealed to the seat of the government of the United States, directed to the President of the Senate. The President of the Senate shall, in the presence of the Senate and House of Representatives, open all the certificates, and the votes shall then be counted. The person having the greatest number of votes shall be the President, if such number be a majority of the whole number of electors appointed; and if there be more than one who have such majority, and have an equal number of votes, then the House of Representatives shall immediately choose by ballot one of them for President; and if no person have a majority, then from the five highest on the list the said House shall in like manner choose the President. But in choosing the President, the votes shall be taken by States, the representation from each state having one vote; A quorum for this purpose shall consist of a member or members from two thirds of the states, and a majority of all the states shall be necessary to a choice. In every case, after the choice of the President, the person having the greatest number of votes of the electors shall be the Vice President. But if there should remain two or more who have equal votes, the Senate shall choose from them by ballot the Vice President. The Congress may determine the time of choosing the electors, and the day on which they shall give their votes; which day shall be the same throughout the United States. No person except a natural born citizen, or a citizen of the United States, at the time of the adoption of this Constitution, shall be eligible to the office of President; neither shall any person be eligible to that office who shall not have attained to the age of thirty five years, and been fourteen Years a resident within the United States. In case of the removal of the President from office, or of his death, resignation, or inability to discharge the powers and duties of the said office, the same shall devolve on the Vice President, and the Congress may by law provide for the case of removal, death, resignation or inability, both of the President and Vice President, declaring what officer shall then act as President, and such officer shall act accordingly, until the disability be removed, or a President shall be elected. The President shall, at stated times, receive for his services, a compensation, which shall neither be increased nor diminished during the period for which he shall have been elected, and he shall not receive within that period any other emolument from the United States, or any of them. Before he enter on the execution of his office, he shall take the following oath or affirmation:—"I do solemnly swear (or affirm) that I will faithfully execute the office of President of the United States, and will to the best of my ability, preserve, protect and defend the Constitution of the United States."

**Section 2.** The President shall be commander in chief of the Army and Navy of the United States, and of the militia of the several states, when called into the actual service of the United States; he may require the opinion, in writing, of the principal officer in each of the executive departments, upon any subject relating to the duties of their respective offices, and he shall have power to grant reprieves and pardons for offenses against the United States, except in cases of



impeachment. He shall have power, by and with the advice and consent of the Senate, to make treaties, provided two thirds of the Senators present concur; and he shall nominate, and by and with the advice and consent of the Senate, shall appoint ambassadors, other public ministers and consuls, judges of the Supreme Court, and all other officers of the United States, whose appointments are not herein otherwise provided for, and which shall be established by law: but the Congress may by law vest the appointment of such inferior officers, as they think proper, in the President alone, in the courts of law, or in the heads of departments. The President shall have power to fill up all vacancies that may happen during the recess of the Senate, by granting commissions which shall expire at the end of their next session.

**Section 3.** He shall from time to time give to the Congress information of the state of the union, and recommend to their consideration such measures as he shall judge necessary and expedient; he may, on extraordinary occasions, convene both Houses, or either of them, and in case of disagreement between them, with respect to the time of adjournment, he may adjourn them to such time as he shall think proper; he shall receive ambassadors and other public ministers; he shall take care that the laws be faithfully executed, and shall commission all the officers of the United States.

**Section 4.** The President, Vice President and all civil officers of the United States, shall be removed from office on impeachment for, and conviction of, treason, bribery, or other high crimes and misdemeanors.

### Article III

**Section 1.** The judicial power of the United States, shall be vested in one Supreme Court, and in such inferior courts as the Congress may from time to time ordain and establish. The judges, both of the supreme and inferior courts, shall hold their offices during good behaviour, and shall, at stated times, receive for their services, a compensation, which shall not be diminished during their continuance in office.

**Section 2.** The judicial power shall extend to all cases, in law and equity, arising under this Constitution, the laws of the United States, and treaties made, or which shall be made, under their authority;—to all cases affecting ambassadors, other public ministers and consuls;—to all cases of admiralty and maritime jurisdiction;—to controversies to which the United States shall be a party;—to controversies between two or more states;—between a state and citizens of another state;—between citizens of different states;—between citizens of the same state claiming lands under grants of different states, and between a state, or the citizens thereof, and foreign states, citizens or subjects. In all cases affecting ambassadors, other public ministers and consuls, and those in which a state shall be party, the Supreme Court shall have original jurisdiction. In all the other cases before mentioned, the Supreme Court shall have appellate jurisdiction, both as to law and fact, with such exceptions, and under such regulations as the Congress shall make. The trial of all crimes, except in cases of impeachment, shall be by jury; and such trial shall be held in the state where the said crimes shall have been committed; but when not committed within any state, the trial shall be at such place or places as the Congress may by law have directed.

**Section 3.** Treason against the United States, shall consist only in levying war against them, or in adhering to their enemies, giving them aid and comfort. No person shall be convicted of treason unless on the testimony of two witnesses to the same overt act, or on confession in open court. The Congress shall have power to declare the punishment of treason, but no attainder of treason shall work corruption of blood, or forfeiture except during the life of the person attainted.

### Article IV

**Section 1.** Full faith and credit shall be given in each state to the public acts, records, and judicial proceedings of every other state. And the Congress may by general laws prescribe the manner in which such acts, records, and proceedings shall be proved, and the effect thereof.

**Section 2.** The citizens of each state shall be entitled to all privileges and immunities of citizens in the several states. A person charged in any state with treason, felony, or other crime, who shall flee from justice, and be found in another state, shall on demand of the executive authority of the state from which he fled, be delivered up, to be removed to the state having jurisdiction of the crime. No person held to service or labor in one state, under the laws thereof, escaping into another, shall, in consequence of any law or regulation therein, be discharged from such service or labor, but shall be delivered up on claim of the party to whom such service or labor may be due.

**Section 3.** New states may be admitted by the Congress into this union; but no new states shall be formed or erected



within the jurisdiction of any other state; nor any state be formed by the junction of two or more states, or parts of states, without the consent of the legislatures of the states concerned as well as of the Congress. The Congress shall have power to dispose of and make all needful rules and regulations respecting the territory or other property belonging to the United States; and nothing in this Constitution shall be so construed as to prejudice any claims of the United States, or of any particular state.

**Section 4.** The United States shall guarantee to every state in this union a republican form of government, and shall protect each of them against invasion; and on application of the legislature, or of the executive (when the legislature cannot be convened) against domestic violence.

## Article V

The Congress, whenever two thirds of both houses shall deem it necessary, shall propose amendments to this Constitution, or, on the application of the legislatures of two thirds of the several states, shall call a convention for proposing amendments, which, in either case, shall be valid to all intents and purposes, as part of this Constitution, when ratified by the legislatures of three fourths of the several states, or by conventions in three fourths thereof, as the one or the other mode of ratification may be proposed by the Congress; provided that no amendment which may be made prior to the year one thousand eight hundred and eight shall in any manner affect the first and fourth clauses in the ninth section of the first article; and that no state, without its consent, shall be deprived of its equal suffrage in the Senate.

## Article VI

All debts contracted and engagements entered into, before the adoption of this Constitution, shall be as valid against the United States under this Constitution, as under the Confederation. This Constitution, and the laws of the United States which shall be made in pursuance thereof; and all treaties made, or which shall be made, under the authority of the United States, shall be the supreme law of the land; and the judges in every state shall be bound thereby, anything in the Constitution or laws of any State to the contrary notwithstanding. The Senators and Representatives before mentioned, and the members of the several state legislatures, and all executive and judicial officers, both of the United States and of the several states, shall be bound by oath or affirmation, to support this Constitution; but no religious test shall ever be required as a qualification to any office or public trust under the United States.

## Article VII

The ratification of the conventions of nine states, shall be sufficient for the establishment of this Constitution between the states so ratifying the same. Done in convention by the unanimous consent of the states present the seventeenth day of September in the year of our Lord one thousand seven hundred and eighty seven and of the independence of the United States of America the twelfth. In witness whereof We have hereunto subscribed our Names,

*G. Washington-President and deputy from Virginia*

*New Hampshire: John Langdon, Nicholas Gilman*

*Massachusetts: Nathaniel Gorham, Rufus King*

*Connecticut: Wm: Saml. Johnson, Roger Sherman*

*New York: Alexander Hamilton*

*New Jersey: Wm: Livingston, David Brearly, Wm. Paterson, Jona: Dayton*

*Pennsylvania: B. Franklin, Thomas Mifflin, Robt. Morris, Geo. Clymer, Thos. FitzSimons, Jared Ingersoll, James Wilson, Gouv Morris*

*Delaware: Geo: Read, Gunning Bedford jun, John Dickinson, Richard Bassett, Jaco: Broom*

*Maryland: James Mc Henry, Dan of St Thos. Jenifer, Danl Carroll*

*Virginia: John Blair-, James Madison Jr.*

*North Carolina: Wm. Blount, Richd. Dobbs Spaight, Hu Williamson*

*South Carolina: J. Rutledge, Charles Cotesworth Pinckney, Charles Pinckney, Pierce Butler*

*Georgia: William Few, Abr Baldwin*





CDR Dave Mater, MSC, USN  
COMNAVAIRLANT

The Medical Department's first order of business following any crisis is to minimize loss of life and to do so; they must be ready to respond with little or no notice. And that is exactly what happened following the worst terrorist attack on American soil. As America sat glued to their television sets watching the horror unravel before them, CDR Jon Umlaut and the medical staff onboard the USS GEORGE WASHINGTON, said good-bye to their families, and prepared to provide medical support as the ship launched its air power to defend our nation's homeland. At times they would have to switch from physical to mental attention to help the crew deal with the stress of the worst terrorist attack on American soil. If left unchecked, such emotions as anger, pain and stress could lead to lack of sleep, bad dreams, fear, and increased anxiety – all of which increases the risk of injury onboard a carrier's deck.

Since September 11, 2001, much has changed. Driving on base has taken on a different meaning. People are actually paying attention now to the National Anthem prior to sporting events, and the kids are again saying the Pledge of Allegiance in our public schools. In the military, increased importance is being placed on Force Protection and Readiness.

In the Medical Departments we have to be ready. You need to ask yourselves, "Can we provide the necessary patient care for the next 30 days, with the supplies we have onboard, if we got word that we were pulling out today?" The next question that you must ask yourself, "If we pulled out today and experienced a situation tomorrow that resulted in mass casualties, are we ready to respond?" Besides the normal, day to day, use of supplies and pharmaceuticals, how long could we sustain if we had a situation where we had multiple casualties with severe trauma? What critical items do we need to have a contingency stock of in case of such emergencies? Do we have enough IV fluids

onboard? Is our walking blood bank up to date? Are our stretcher-bearers trained and ready to respond? Do we have enough morphine to help ease the pain? What do we do if we have a casualty with severe burns over a third of their body or a leg that has been amputated? And finally, what do we do if we have a chemical or biological attack? How do we respond when they help on an injured member of the Special Forces that may have been exposed to a biological agent?

These are all situations that we must be prepared to deal with. Now, more than ever, it is important to make sure that, at a minimum, your providers, nurses, and Independent Duty Corpsmen are trained in the treatment of chemical and biological casualties. It is a three-day training class taught by the Navy Environment and Preventive Medicine Unit (EPMU). In Norfolk, courses can be scheduled at EPMU-2 by calling (757) 444-7671.

### CBR Pack-Up Kits

At COMNAVAIRLANT, Force Supply has assumed management authority and responsibility for CBR pre-treatment/antidote medications. Under N41 control, selected items of chemical nerve agent treatment and biological agent antidote components will be managed as TYCOM support pack-up kits (PUK), developed, maintained, funded, and refurbished as necessary within the COMNAVAIRLANT consumable asset re-distribution program (CARP). CARP will build three rotational support PUK(s). Once the PUK(s) are built, the rotation cycle will be one PUK on the deployed carrier, one PUK on the work-up carrier, and the third PUK in rework for material inventory, shelf-life check/extension, and re-furbishment at Naval Station Norfolk Building V-88.

The PUK(s) will consist of doxycycline hyclate capsules, atropine injectors, atropine sulfate injectors, doxycycline, pralidoxime chloride injectors, and ciprofloxacin. Pyridostigmine bromide tablets and cana anticonvulsant injectors will be carried on all carriers and are not part of the PUK(s). Due to their critical nature, these materials must be considered "never out" items. The SUPPO/SMO will jointly determine storage of these components and ensure that a plan for distribution to ship's force is developed and incorporated into the Ship's Battle Bill/SORM.



## Naval Medical Clinic, Norfolk, Helps Support Local Carriers

OASD(HA) requires that all TRICARE Prime recipients, including active duty, be assigned a Primary Care Manager by Name, for better continuity of care. Logically, the primary care manager for Ship's Company would be the Senior Medical Officer, General Medical Officer, or Physician Assistant. This logic, however, fails to address the problem created by operational forces when the Ship is underway and member's of Ship's Company are unable, medically, or for other reasons, to be onboard. These service members are unable to access their Primary Care Manager by Name. In Hampton Roads, a recent MOU was signed that assigned a Primary Care Manager by Name [which in Naval Medical Clinic, Norfolk's case, is a group of providers assigned in a particular passageway] for each carrier homeported in Norfolk, to care for their Ship's Company when the ship is out to sea and a service member is left behind.

### Carrier PCM Locations @ Sewell's Point:

USS ENTERPRISE (CVN 65)  
Passageway Hotel (H) (757) 314-6260

USS THEODORE ROOSEVELT (CVN 71)  
USS DWIGHT D EISENHOWER (CVN 69)  
Passageway India (I) (757) 314-6265

USS GEORGE WASHINGTON (CVN 73)  
USS HARRY S TRUMAN (CVN 75)  
Passageway Juliet (J) (757) 314-6292

After hours, sailors should call (757) 314-6301 and ask to speak to the on-duty PCM.

### SWMDO Designation

Along with our COMNAVAIRPAC brethren, I am often faced with questions from our Medical Service Corps Officers aboard our aircraft carriers in



reference to the standards as set forth in the guiding instruction, OPNAVINST 1412.8A, Surface Warfare Medical Department Officer (SWMDO) Qualification and Designation. The most prevalent question is what training or experience outside of the list in the instruction is acceptable, as many of our medical personnel are either not eligible or unable to obtain a quota for the listed courses.

The consensus at both AIRPAC and AIRLANT, is for those that would like to request a waiver based on other operational courses, or inability to get a quota in one of the courses on the list, is to submit a waiver request to OPNAV (Code N76) via the cognizant TYCOM. For those without formal training, you must have been onboard for a minimum of 6 months before forwarding your waiver request via Force Medical for endorsement.

### Radiation Health Update

Several minor administrative changes have been made to Radiation Health Protection Manual. Per BUMED (MED-02) msg 051318Z OCT 01, corrective action shall be taken pending release of next revision to NAVMED-P5050.

1. NAVMED Form 6470/1: Column 6, social security number, should be recorded without hyphens; the examples given in items 2.B.6 on the back of the form should read "e.g.



000000000" and "i.e., 800YYMMDD". The back of the form should read "e.g., 000000000" and "i.e., 800YYMMDD" respectively; column 7, date of birth, should be reported as YYYYMM vice YYYYMMDD; columns 9 and 10, period of exposure, dates should be recorded as YYYYMMDD vice YYYYMMDD.

2. NAVMED Form 6470/3: Column 5, social security number, should be recorded without hyphens, the example given in item 5 on the back of the form should read "i.e., 800YYMMDD"; Column 7, exposure period information, dates should be recorded as YYYY MM DD vice YYYY MMM DD.
3. Paragraph 202(4) incorrectly states that the reasons why a termination radiation examination radiation medical examination was not completed or performed should be recorded in the "disqualifying defects" block of the SF 88. The correct location for documenting this information on the SF-88 is in the "Notes" block.

### TRICARE For Life

TRICARE For Life and the Thrift Savings Plan (TSP) will perhaps have the biggest impact on the quality of life of our military members than any other recent initiative. The compounding aspects of investing early, before our junior members accumulate debt, speak for itself. If our junior folks start now, they will have a sizable nest egg built up by the time they retire from military service. But long-term planning for healthcare after age 65 has perhaps greater implications and is often not planned for when people sit down and plan their retirement portfolios.

In the past, military retirees often retired near military installations where they had access to free healthcare at the military treatment facility. Health care for life is what many of our older uniformed services believed they signed up for when they committed 20 years or more of their lives for their country. And true, they remained eligible for health care in military treatment facilities, if they happen to live close to one. Many didn't and for others that did, access suddenly vanished with BRAC closures such as the Naval Hospital in Philadelphia. After becoming Medicare-eligible at age 65, CHAMPUS eligibility disappeared and they had to rely on Medicare providers for their care.

But beginning 1 October 2001, TRICARE will provide wraparound coverage like a supplemental policy, acting as second payer to their Medicare providers. Our uniformed services retirees, their family members and survivors, age 65 and over, will have little or no out-of-pocket costs for prescriptions or medical services, and no premium costs. Their only requirements are to be enrolled in Medicare Part B, and be registered in DEERS.

Here are a few things eligible beneficiaries should know about TRICARE For Life:

- When the provider files a Medicare claim for their care, the claim will automatically cross over to TRICARE for payment of remaining balances on TRICARE-covered services, so most of the time, they won't see any paperwork, except for the piece showing a \$0 balance.
- Beneficiaries age 65 and over do not have to sign up or enroll in TRICARE, nor do they need special cards.
- Some may have the opportunity to choose an option called TRICARE Plus that entitles them to priority care from a primary care provider at participating military treatment facilities.
- TRICARE For Life will be available for retirees living overseas, but they must be enrolled in Medicare Part B. In most cases, TRICARE will be first payer for these beneficiaries because Medicare coverage is not available overseas.
- TRICARE For Life beneficiaries may be able to use VA facilities, many of which are TRICARE "network providers", meaning they contract with TRICARE to provide medical services to TRICARE-eligible beneficiaries. Because Medicare does not reimburse VA facilities, TRICARE is first payer to the VA, and beneficiaries will have to pay cost-shares, usually about 20 percent for medical services.
- The TRICARE For Life and Senior Pharmacy programs are permanent. The DoD has included \$3.9 billion in a budget request to Congress to fund them. Beginning in 2003, an accrual fund will be set up to cover the future costs of the program.



I encourage everyone to become knowledgeable about their TRICARE benefits and how they work. They will find that there are many TRICARE programs that sound similar, and this may cause some confusion. For example, the medical benefit is TRICARE For Life; the pharmacy benefit is TRICARE Senior Pharmacy Program; TRICARE Prime is a enrollment option only for beneficiaries under age 65; TRICARE Plus is a primary care manager program available at some military treatment facilities for all beneficiaries, including those over age 65.

Additional information and updates about TRICARE For Life are posted on the TRICARE Web site at <http://www.tricare.osd.mil/ndaa>.

### **Individual Case Management Program for Persons with Extraordinary Conditions (ICMP-PEC)**

The ICMP-PEC is a special program for beneficiaries who meet the TRICARE definition of custodial care. Through the ICMP-PEC a waiver can be granted that allows for coverage of care and services that are either limited or excluded in the basic TRICARE program. The coverage may be granted as long as the services are clinically appropriate and cost effective. The law restricts coverage of custodial care as a TRICARE benefit under the basic program.

The term “waiver” sometimes causes confusion or concern because it may sound like a beneficiary is losing or giving something up, when in reality the reverse is true. Through the ICMP-PEC, participants may receive more covered care and services than they normally would.

### **TRICARE Courses and Conferences**

- TRICARE Basic Course                      Nov 14-16 and Dec 4-7
- TRICARE Advance Course                Dec 6-7

POC for TRICARE Courses is  
[Paul.Wverdeman@TMA.osd.mil](mailto:Paul.Wverdeman@TMA.osd.mil)

- 2002 TRICARE Conference, Washington D.C.  
Feb 4-7, 2002

### **Medical Prime Vendor**

As most of you know, we have been struggling with the Medical Prime Vendor contract for some time ... two problems ... first the service on the existing contract was bad for various reasons and second, the contract was expiring on 15 December 2001. We have taken steps to improve the performance and DLA has been able to extend the contract through December 15<sup>th</sup> of 2002. So for now, the requisitioning procedures and processes will be the same as today except for the way material is routed. We are working the details with more to follow, but for now, you will see no changes at the deck plates.

For FY 2003 and beyond, it's to our advantage to be able to develop the capability to transmit EDI transactions directly to the vendor based on National Drug Codes. Industry survey conducted by DLA indicates that it will be difficult to obtain a vendor that will interface with our legacy systems, since Navy is the only service still using NSNs to order medical supplies. If we don't change, it will most likely mean extra costs.

To that end, we believe the ultimate solution would be to make a few changes to Rsupply and SAMS that would do two things ... first provide a direct interface between Rsupply and SAMS that would enable the two systems to talk to each other, pass medical requirements and inventory information back and forth between the two systems.

In addition, we need SAMS to produce an EDI file that can be transmitted directly to the vendor via SALTS or some other data link. With these changes, the corpsman can place orders directly from SAMS and doesn't have to double process the requirement. The corpsman can also order by National Drug Code with the niin information being automatically passed to Rsupply for ordering and receipt purposes for stock requirements. These system changes will let us take advantage of industry best practices while keeping it transparent to you in the fleet. To make this happen, an IPT is being created that can work the details. Stay tuned ...